

STATE OF MICHIGAN



JOHN ENGLER, Governor

DEPARTMENT OF COMMUNITY HEALTH

LEWIS CASS BUILDING

LANSING, MICHIGAN 48913

JAMES K. HAVEMAN, JR., Director

March 2002

Dear Medicaid Dental Provider:

The purpose of this letter is to inform you that the Department of Community Health (DCH) is currently working toward implementation of all the federally mandated Health Insurance Portability and Accountability Act (HIPAA) transaction standards. The implementation of the claims transaction (837) standard on October 1, 2002, may have a significant impact on you.

Effective October 1, 2002, the DCH will no longer accept any of its current proprietary electronic claim formats. Beginning on that date, all **electronic dental** claims must be submitted utilizing the ANSI X12N 837 Dental, Version 4010 claim format, regardless of date of service. Claims submitted on or after October 1, 2002, using the current proprietary electronic dental claim format will be rejected.

If you currently submit electronic dental claims to the DCH, you should begin planning now for your conversion to the new national claim format. The Implementation Guide for the 837 Dental transaction set is available for free downloading at www.wpc-edi.com/HIPAA. In addition, the Michigan Electronic Billing Manual, specifying how to submit these transactions to DCH, is available on the DCH website at www.mdch.state.mi.us/msa/mdch_msa/medicaid_data.htm. Please note that the processes described in the Michigan Electronic Billing Manual represent a combination of the current electronic processes with a note toward the future. Information regarding provider testing for the electronic dental claims will be provided at a later date.

Although the DCH will continue to accept paper dental claims submitted on the ADA 2000 claim form after October 1st, providers are encouraged to submit claims electronically. Electronic claims are processed faster and with fewer errors, resulting in improved cash flow.

If you have any questions regarding the changes being made, you may contact the Provider Inquiry Line at 800-292-2550 or email your questions to providersupport@michigan.gov.

Cordially,

A handwritten signature in black ink, appearing to read "James K. Haveman, Jr.", written over a large, stylized initial "J".

James K. Haveman, Jr.

